

'asbestosis.' And, there is a lung disease found in workers in the manufacture of alumina abrasives, called 'Shaver's disease' (after Dr. Shaver who described it). The dust has high concentrations of alumina and silica. Diatomaceous earth, a form of free silica, similarly causes serious lung disease. And there is byssinosis, resulting from the inhalation of cotton dust. Until a handful of years ago, some of the experts insisted that many dusts when inhaled into the lungs were inert; that is, they produced no effect on the body. However, as we learn more, we find that these so-called "nuisance" dusts are also capable of causing disease. For example, talc, corundum, feldspar, graphite, porcelain, barite, cement, mica, slate, kaolin, and many others.

Even farmers, as well as grain handlers in the holds of ships, suffer from a respiratory disability when inhaling large amounts of grain dust. They develop chronic bronchitis with shortness of breath, cough, etc. Chronic bronchitis can result from inhalation of irritating dusts, fumes and gases: for example: phosphorus chloride and other volatile chloride compounds, acid fumes, phosgene, nitrous gases, aldehydes, solvents and other chemicals.

One of the leading toxicologists in the country, Dr. Herbert Stokinger, of the Public Health Service, points out that:

... our experience with occupational lung diseases makes it difficult to escape the conclusion that all dusts, irrespective of their nature, if breathed in sufficient quantity and for sufficient time, may cause profound damage to the lung, and emphasizes the desirability of the physician's obtaining an accurate and thorough history on individuals suspected of pulmonary disease.

Other Chronic Diseases

Let me discuss a few more of the chronic disease hazards, since these are the chief occupational health problems of the present day. The chlorinated hydrocarbons, such as carbon tetrachloride, represent a large group of chemicals used in industry. These can damage the liver and the kidneys. The chemicals known as aromatic amines, represented by beta naphthylamine, used in the manufacture of dye and other commodities, have been proven to cause cancer of the urinary bladder. The central nervous system—that is, the brain and spinal cord—can be affected by many chemicals. Tetraethyl lead causes severe brain disease called encephalopathy. Manganese, one of the im-

portant industrial metals, causes a disease that is remarkably similar to multiple sclerosis. Carbon disulphide may cause severe nervous system effects, affecting the nerves, muscles, and brain.

Serious and sometimes fatal blood diseases may be caused by exposure to benzol. Of course, we know that ionizing radiation in any form—whether through exposure to X-rays or radioactive chemicals—may cause fatal blood diseases as well as various types of cancer. The bones can be affected by exposure to radioactive chemicals, fluorides, phosphorous, and other chemicals. Cadmium affects the lungs and kidneys.

The heart may be affected by the metal known as antimony, and possibly by nitroglycerin, and there have been a number of reports that the heart may also be affected by brucellosis infection, which occurs among slaughter house workers and farmers.

Nitroglycerin and related chemicals used in the manufacture of dynamite and other explosives make an interesting story and illustrate some of the problems in occupational medicine. Workers have been exposed to this group of chemicals for many years. They have known for many years the severe headaches this chemical causes. For years, also, we have heard reports of sudden deaths among workers exposed to nitroglycerin. We do know that this chemical has a powerful effect on the body. It causes profound reduction in blood pressure, severe headaches, palpitation of the heart, nausea and vomiting, fainting, dizziness, and other symptoms. It can also cause skin inflammation. Whether it can cause heart disease is disputed. Even though we have known this chemical for many years, there has been insufficient investigation of the health hazards, and inadequate preventive measures.

Cancer

Occupational cancer is one of our most serious problems. It also provides us with a remarkable opportunity to study cancer in general. The first breakthrough in the mystery of cancer came with the discovery of an occupational cancer. In 1775, in England, Dr. Percival Pott called attention to soot as a cause of cancer of the scrotum in chimney sweeps. These were little boys who climbed into the chimneys to clean them out. Years after working in this

occupation, they died of cancer of the scrotum, which was traced to the soot which penetrated their clothing. Similarly, for years we have known that an excessive number of uranium miners in Europe have died of lung cancer. (Recent studies in our own uranium mines reveal dangerously high exposures.)

Since then numerous other chemicals, in addition to ionizing radiation, have been demonstrated to be capable of causing, or contributing to the development of, cancer in various parts of the body. Some examples are beta naphthylamine, which I mentioned earlier, causing cancer of the urinary bladder, coal tars which can cause cancer of the skin, chromates which cause cancer of the lung, and many others. Recent studies have focused suspicion of lung cancer hazards in the work of welders, sheet metal workers and other metal workers.

Skin Diseases

Skin diseases are, as you know, the most frequent type of occupational disease which we see. Most of them result from direct irritation by chemical or physical agents. A smaller number result from an allergic reaction to a chemical. Almost any chemical contact can result in dermatitis. Many of the new chemicals are causing skin troubles. For example, the epoxy resins: These materials are being widely used in electronics, automobiles, pattern-making, die-casting, aircraft, and other trades—for surface coatings and paints, molding compounds, various plastics, and electrical insulation. Another group of chemicals which causes skin disease are the chromates. Chrome ulcerations of the skin are well known. The chlorinated hydrocarbons also may cause skin diseases. One of them is called 'chlor-acne' because it resembles acne. Machinists and metal workers often get a dermatitis from cutting oils. Coal tars produce skin changes, some of which may turn into cancer. There are a host of others too numerous to mention.

Protection

These are only a few examples of the occupational disease hazards arising from contact with chemicals. The alert worker will become acquainted with the materials he is handling and the process he is using, so that he can help to protect himself and his fellows. If he should suffer excessive

exposure to some harmful material, he will know what to tell the doctor who examines him. The alert doctor will be able to correlate the occupational history with the physical findings and symptoms and decide whether the patient is suffering from an occupational disease.

Very few occupational diseases produce such characteristic symptoms that they can be readily identified as an occupational disease. After all, the body can react to harmful stimuli only in a limited number of ways. For example, a worker may have severe pains in his abdomen. These might be caused by appendicitis or by lead poisoning. Leukemia may result from unknown causes or from exposure to X-rays. A person suffering a certain type of paralysis may have multiple sclerosis, a disease of as yet unknown cause, or it could be manganese poisoning. The person who has a cough, shortness of breath, and is losing weight, may have tuberculosis, silicosis, berylliosis or cancer of the lungs. A history including occupational history and a thorough examination is the only way of telling these conditions apart.

Prevention

All occupational diseases are preventable. If we were doing our job right, we would have nothing to talk about today. The fact is that unknown numbers of people are suffering from a great variety of occupational diseases because we are not adequately protecting against them. What are the protective measures which we should follow?

(1) *Education:* Employees should be given adequate training for their jobs, so that they understand the process, know the materials they are handling, and, therefore, can protect themselves and other workers from injury.

Key employees should be instructed in first aid. Management and labor both have responsibilities here. Shop health and safety committees can help in the health education of workers. There is no substitute for knowledge.

(2) *Protection of the environment:* This means from the air of harmful dusts, fumes, gases, vapors. This is accomplished by means of engineering measures, such as exhaust ventilation, enclosure of hazardous processes, wetting down methods for suppression of